Case 19-70284-JAD Doc 12 Entered 05/21/19 14:38:14 Desc Main Filed 05/21/19 Document Page 1 of 1

Fill in this information to identify your case:										
Debtor 1	Thomas Edward Papcunik									
	First Name	Middle Name	Last Name							
Debtor 2	Rhoda N. Papcur	Rhoda N. Papcunik								
(Spouse if, filing)	First Name	Middle Name	Last Name							
United States Bankruptcy Court for the:		WESTERN DISTRICT OF PENNSYLVANIA								
Case number (if known)	19-70284									

## Official Form 423

## **Certification About a Financial Management Course**

12/15

If you are an individual, you must take an approved course about personal financial management if:

- you filed for bankruptcy under chapter 7 or 13, or
- you filed for bankruptcy under chapter 11 and § 1141 (d)(3) does not apply.

In a joi	nt cas	e, each debtor	must take	the course. 11 U.S.C. §§	727(a)(11) and 1328(g).						
the pro	ovider	does notify the	court, yo		ate. The provider may notify the If the provider does not notify th I be discharged.						
,		u filed under chapter 7 and you need to file this form, file it within 60 days after the first date set for the meeting of creditors under § 341 of the kruptcy Code.									
					n, file it before you make the last pa e Bankruptcy Code. Fed. R. Bankr.		plan requires or before you file a				
		es, the court ca h the court and			e financial management course.	To have the req	uirement waived, you must file				
Part 1	Tell	the Court Abo	ut the Rec	quired Course.							
You n	nust ch	eck one:									
_	Lco	mnleted an ani	aroved co	urse in personal financial	l management:						
		Date I took the course		05/20/2019	management.						
	Dati	Date I took the course		MM/ DD / YYYY							
	Nan	Name of approved provider		Access Counseling,	Inc.						
	Cer	Certificate Number		15317-PAW-DE-032843637							
	I an	I am not required to complete a course in personal financial management because the court has granted my motion for a waiver of the requirement based on (check one):									
		☐ Incapacity. I have a finances		mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about							
		Disability.			be unable to complete a course in after I reasonably tried to do so.	personal financia	al management in person, by				
		Active duty.	I am cur	rently on active military duty	y in a military combat zone.						
	Residence. I live in a district in which the United States trustee (or bankruptcy administrator) has determined that the approved instructional courses cannot adequately meet my needs.										
Part 2	Sig	n Here									
1		hadafamaad		Salad Salaman and assess of							
ı certif	y that t	ine information I	nave prov	ided is true and correct.							
		a N. Papcunil			Rhoda N. Papcunik		ay 21, 2019				
Sigr	ature o	f debtor named or	certificate		Printed name of debtor	MN	M / DD / YYY				